

## REMARKS

In response to the office action dated 1/26/01, claims 1-46 have been canceled. Claims 47-54 are newly presented, support for which is found in Application Serial No. 08/290,031, filed 8/12/94 (the '031 Application). The basis for this is as follows: the instant application is a continuation-in- part and incorporates by reference Application Serial No. 08/605,323 (the '323 Application). The '323 Application is a continuation-in- part and incorporates by reference Application Serial No. 08/515,379 (the '379 Application). The '379 Application is a continuation-in- part and incorporates by reference the '031 Application. Therefore per MPEP 2163.07(b) and 608.01(p), all of the subject matter/disclosure of the '031 application is properly incorporated by reference and is part of the instant application. Also per USC §120, claims 47-54 in the instant application take priority from the '031 Application and thus have a priority date of 8/12/94.

## CONCLUSION

Applicant submits that the present application is in form for allowance, and such action is respectfully requested. The Commissioner is authorized to charge any additional fees which may be required, including petition fees and extension of time fees, or credit any overpayment to Deposit Account No 50-1865 (Docket No. 13724-787).

Respectfully submitted,

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**Versions With Markings To Show Changes Made.**

Claims 1-46 have been canceled.

Please add the following new claims:--

47. A method of volumetric hyperthermic ablation of tumorous tissue, the method comprising:
- providing a tissue ablation apparatus comprising an elongated delivery device including a distal end, a proximal end and lumen; an RF electrode having a tissue piercing distal portion positionable in the delivery device as the delivery device is advanced through tissue, the RF electrode having a non-deployed state when positioned in the delivery device and a deployed state, the RF electrode distal portion exhibiting in the deployed state a curvedly changing direction of travel in tissue as the RF electrode is advanced from the delivery device into a selected tissue site; and an electrode advancement member coupled to the RF electrode for controllably advancing the RF electrode out of the elongated delivery device into the selected tissue site;
  - introducing the elongated delivery device to the selected tissue site;
  - advancing the RF electrode from the elongated delivery device to at least partially surround a tissue mass;
  - delivering energy from the energy delivery device to the tissue mass; and
  - creating a controlled ablation volume at the selected tissue site.
48. The method of claim 47, further comprising:
- providing an obturator, the obturator configured to be positionable in one of the elongated delivery device or an introducing device;
  - introducing or advancing the obturator to the selected tissue site; and
  - utilizing the obturator to introduce the elongated delivery device.
49. The method of claim 48, further comprising:
- providing an introducing device;
  - introducing the obturator through the introducing device;
  - removing the obturator from the introducing device; and
  - introducing the elongated delivery device through the introducing device.

50. The method of claim 47, wherein the ablation volume includes a margin of non-tumorous tissue substantially surrounding a tumor volume.

51. The method of claim 47, further comprising:  
changing a direction of travel of the distal portion of the electrode responsive to a tissue applied force.

52. The method of claim 47, further comprising:  
utilizing a changing direction of travel of the distal portion of the electrode to position the electrode in the selected tissue site.

53. A method of volumetric hyperthermic ablation of tumorous tissue, the method comprising:

providing a tissue ablation system including a obturator, a tissue ablation apparatus including an elongated delivery device including a distal end and a proximal end, an RF electrode including a tissue penetrating distal portion, the RF electrode being positionable in the delivery device as the delivery device is advanced through tissue, the RF electrode having a non-deployed state when positioned in the delivery device and a deployed state, in the deployed state RF electrode distal portion exhibiting a curvedly changing direction of travel in tissue as the RF electrode is advanced from the delivery device into a selected tissue site, and an electrode advancement member coupled to the RF electrode for controllably advancing the RF electrode out of the elongated delivery device into the selected tissue site;

introducing the obturator through tissue to the selected tissue site;

utilizing the obturator to introduce the elongated delivery device to the selected tissue site;

advancing the RF electrode from the elongated delivery device into the selected tissue site to define an ablation volume at the selected tissue site;

delivering energy from the energy delivery device to the selected tissue site; and

creating a controlled ablation volume at the selected tissue site.

54. The method of claim 53, wherein at least a portion of the RF electrode includes an insulator, the method further comprising:

utilizing the insulator to define at least a portion of the ablation volume.--